

**WEST VALLEY CITY BUILDING PERMIT APPLICATION. For questions, call #801-963-3283**

Date of Application:				DATE ISSUED    /    /		PERMIT #	
<b>BUILDING FEE SCHEDULE</b>							
Type of Construction:				Building sqft:		Valuation \$	
Address:				Rough Basement sqft:		Building Fee	
				Finish Basement sqft:		Plan Review Fee	
Lot #                      Subdivision				Carport sqft:		Subtotal	
Unit #                      Bldg #				Garage sqft:		- Plan Deposit	
Space #                      Mobile Home Park				Porch sqft:		Electrical Fee	
Parcel #				Type of Bldg:                      Occupancy Group:		Mechanical Fee	
Business Name:				# of stories                      # of bedrooms		Plumbing Fee	
						Reinspection Fee	
PROPERTY OWNER:				# of dwellings                      # of bldgs.		Demolition Fee	
				Type of Constr:    frame    brick		Fast Track Fee	
Address:				block    concrete    steel		Engineering Fee	
City/zip:				Maximum Occupant Load:		Investigation Fee	
OWNER/BUILDER: yes    no                      Phone #				Fire Sprinkler:    yes    no		Fire Dept. Fee	
Architect:                                      Phone#				Bond Required:    yes    no		P/Z Review Fee	
				Company Paying Bond:		P/Z Impact Fees	
GENERAL CONTRACTOR:						State Fee	
Address:				Federal Tax I.D.#		Kiva Fee	
City/zip:						Bond Amount	
Phone #                      State License #						Total	
				Department Approvals		Required                      Approved	
ELECTRICAL CONTRACTOR:				Fire Department			
				Water & Sewer Improvement District			
Address:				Public Works			
City/zip:				Health Department			
Phone #                      State License #				HIGH WATER TABLE:                      yes                      no			
PLUMBING CONTRACTOR:				If YES, read the following: Due to high water table, footing elevations must be verified by contractor with transit at time of footing inspection OR leave a string stretched level from street curb to read exterior wall footings			
Address:				MAXIMUM allowable footing depth:                      Below top of street curb:			
City/zip:				Plan Deposit \$                      Comments:			
Phone #                      State License #							
MECHANICAL CONTRACTOR:							
Address:				Plan Name & #:			
City/zip:							
Phone #                      State License #				This residential plan design is approved for all location in West Valey City which have been designated in accordance with section 1613 of the 2006 International Building Codes as seismic			
Previous usage of land or structure (past 3 years):				design category:                      Approval:                      Date:			
TYPE OF IMPROVEMENT/KIND OF CONSTRUCTION:				This application does not become a permit until signed below			
____ sign    ____ new bldg.    ____ remodel    ____ addition							
____ repair    ____ move bldg.    ____ convert use    ____ demolish							
SUB-CHECK: ZONE                      _____				Plan Check approved by:                      Date:			
Zone Approved by:                      Date                      _____				Signature of approval:                      Date:			
Disapproved by:                      Date                      _____				This permit becomes null and void if work or construction authorized is not commenced within 180 days or if construction or work is suspended or abandoned for a period of 180 days at any time after work is comenced. I hereby certify that I have read and examined this application and know the same to be true and correct. All provision of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provision of any other state or local law regulating construction or the performance of construction and that I make this statement under penalty of perjury.			
<b>MINIMUM SETBACKS IN FEET</b>							
TBC	Pline	G. Side	Side	Rear			
Comments:				Print Owner/Contractor or Authorized Agent Name			
				Signature of Contractor or Authorized Agent                      Date			
				Signature of Owner                      Date			